Advance Credit Union Ltd Payroll Deduction Form

Please complete in black ink

To the Payroll Manager:	
Instructions 'Please commence deduction	ons of the sum of £
Amount in words:each month from my wage/salary in fav. Deductions are to commence from the fit in effect until such time as I give notice to changes'	rst available pay date and shall remain
Name:	
Address:	
Department:	Payroll No:
Please quote my membership number* * TO BE COMPLETED BY CREDIT UNION	on all payments
Signature: Please complete and return to the	Date: Credit Union as the address below
FOR OFFICE USE ONLY	
New Member: YES NO	Special Instructions Noted: YES NO
Checked at C.U. by:	Date:

Advance Credit Union Ltd

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